



# Disaster Business Loan Application

## Quick Notes

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This review of the Disaster Business Loan Application will allow your business to better understand how this application should be completed for maximum efficiency. Each Item number will be identified below with an explanation directly associated with the completion of the application.

**Item 1.** When completing this **Application** you are only selecting and checking off Economic Injury (EIDL)

**Item 2.** Select the **Organizational Type** of your Business that includes any one of the seven options listed on the form. If you are a Sole Proprietorship of Independent Contractor utilizing your social security number as your identifier you will need to complete the SBA Form 5C instead of the current form.

**Item 3.** This requires the **Legal Name** of the Business

**Item 4.** This requires the **Federal E.I.N.** for the Business

**Item 5.** Please the **Trade Name** of the Business here, if applicable

**Item 6.** This requires the **Business Phone Number** including area code

**Item 7.** This requires the **Business Mailing Address**; please check off business box when completing this section.

**Item 8. Damaged Property Address** - Please leave this area blank; if applying online and you are asked to complete this section just fill in the information the same as your mailing address. This is a glitch in the system that sometimes requires additional information and sometimes does not.

**Item 9.** Provide the **Contact Names of the Individuals Associated with the Business.** The Economic Loss Verification Individual with a Name and Number; and the Information Necessary to Process Application individual with a Name and Number

**Item 10. Alternate Way to Contact You** – You may select any of the items listed on the application and provide the appropriate information.



**Item 11. Business Activity** – Provide information that best describes your type of business.

**Item 12. Number of Employees** – Provide the Number of Employees that existed within your organization before the Economic Disaster occurred.

**Item 13. Date Business Established** – Provide the date your business began operations; usually you can find this on your most recently filed tax return.

**Item 14. Current Management Since** - This date represents the date that the current management took control the business operation.

**Item 15. Amount of Estimated Loss** – This area will be left blank since there is not physical damage with Economic Injury.

**Item 16. Insurance Coverage** - This area will be left blank since there is normally not insurance related damage with Economic Injury.

**Item 17. Owners** – Please list all **Owners** of the Business that hold and/or control 20% or greater ownership interest in the Business. The second section under **Business Entity Owner** should be left blank and not checked off online if the Business Owner does not own 20% or greater ownership interest in any other Business in addition to the Applicant Business. This would be identified as an “Affiliated Business” online and should not appear on the online application if you do not check off the box associated with **Business Entity Owner**.

**Item 18. Business Related Questions** – Please answer “Yes” or “No” to the seven questions. Any “Yes” answers will require a written explanation and/or an answer to the “Additional Information” box on the online application.

**Item 19. Addition Question regarding Criminal Acts.** - Please answer “Yes” or “No”, and provide additional information if “Yes” is selected.

**Item 20. Physical Damage Only** – Please disregard

**Item 21. Assistance In Completing Application** – Provide the Name of the Company and/or Individual that directly completed this application on your behalf. This does not include any Company and/or Individual that may be providing general business consulting services or support services for your Business operation during the economic disaster and subsequent recovery.